| CERTIFICATE | - | | | | |
|--|--|---|--|--|--|
| | that this correspondence is being deposited with the as first class mail in an envelope addressed to: Co | | | | |
| Patents, PO Box | 1450, Alexandria, VA, 22313-1450 on <u>25 April</u> | | | | |
| | Camara I Name of Person Mailing Paper or Fee) | | | | |
| | Ca | | | | |
| (Signature of Pers | son Mailing Paper or Fee) | | | | |
| 125 | , | | | | |
| OF THE WAR | | PATENT APPLICATION | | | |
| APR 3 0 2007 [w] | | Attorney Docket No. SUN-P9705 | | | |
| APR 3 V | IN THE UNITED STATES PATENT | AND TRADEMARK OFFICE | | | |
| THIN PATEN | AT ADDITION OF | | | | |
| EINSKE PATER | NT APPLICATION OF |) Examiner: Rahll, Jerry T. | | | |
| Robert J. Dros | st et al. |) | | | |
| | |) Group Art Unit: 2874 | | | |
| Serial No. 10/816,762 | |) | | | |
| Filing Date: 2 | April 2004 | · · | | | |
| | - |) | | | |
| | CAL COMMUNICATION BETWEEN C-TO-FACE SEMICONDUCTOR CHIPS |) | | | |
| TACE | -10-PACE SEMICONDUCTOR CHIPS | , | | | |
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| | AMENDMENT TRANSA | <u> IITTAL LETTER</u> | | | |
| Mail Stop: A | AF | | | | |
| - | mmissioner for Patents | | | | |
| P.O. Box 145 | 50 | | | | |
| Alexandria, V | VA 22313-1450 | | | | |
| Q: | | | | | |
| Sir: | ction with the above-referenced U.S. n | atent application, transmitted herewith are | | | |
| | | atent application, transmitted herewith are | | | |
| the following | papers: | | | | |
| [x] Response under 37 C.F.R. § 1.111 to official action mailed 29 January 20 | | | | | |
| | Advisory Action mailed 8 March 2007. | | | | |
| [] | A petition for extension of time is also enclosed with a fee of \$55.00 for a one- | | | | |
| | month extension for a small entity. | | | | |
| | · | | | | |
| | Terminal disclaimer under 37 C.F. R. § 1.321(c), including | | | | |
| | [] check for \$130.00 fee under 37 C.F.R. § 1.20(d), and | | | | |
| | [] 2 certificates under 37 C.F.R. § 3.73 | (b). | | | |

Information disclosure statement, form 1449 and ___ references.

No additional claims fees are required.

[]

[x]

[] An additional fee is required, and is calculated as shown below:

| AMENDED CLAIMS | | | | | | | |
|--|------------------|--|-----------------|----------|------------|--|--|
| | NO. OF CLAIMS | HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR | EXTRA CLAIMS | RATE | ADDT'L FEE | | |
| Total Claims | | MINUS = 20 | 0 | x \$18 = | | | |
| Independent Claims | | MINUS = 3 | 0 | x \$78 = | | | |
| If Amendment adds mult Total Amendment Fee | | | | | | | |
| If small entity status is cl | \$0.00 | | | | | | |

| [] A check in the amount of \$ | is enclosed. |
|--------------------------------|--------------|
|--------------------------------|--------------|

- [] Charge \$___ to Deposit Account No. ___ (Docket No.).
- [x] Please deduct any <u>underpayments</u>, credit any <u>overpayments</u>, and charge all required <u>extension of time fees</u> to Deposit Account Number 50-1003. (Docket No. SUN-P9705).

Shun Yao Park, Vaughan & Fleming LLP 2820 Fifth Street Davis, CA 95618

Tel: (530) 759-1667 Fax: (530) 759-1665

Email: shun@parklegal.com

Respectfully submitted,

By

Shun Yao

Registration No. 59,242

Date: 25 April 2007



I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450, on 25 April 2007

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

(Signature of Person Mailing Paper or Fee)

Application Number: 10/816,762

: Robert J. Drost et al.

Confirmation Number: 1134

Applicant Filed

: 2 April 2004

TC/A.U.

: 2874

Examiner

: Rahll, Jerry T.

Docket Number

: SUN-P9705

Customer No.

: 57,960

M/S: Box AF

Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

AMENDMENT

Sir

In response to the office action of 29 January 2007, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.